



Docket No.: R2184.0123/P123
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Hiroshi Ishii et al.

Application No.: 09/915,360

Confirmation No.: 6987

Filed: July 27, 2001

Art Unit: 2622

For: IMAGE PROCESSING DEVICE, IMAGE
PROCESSING METHOD AND IMAGE
FORMING APPARATUS

Examiner: Mark R. Milia

AMENDMENT AFTER FINAL ACTION (37 C.F.R. SECTION 1.116)

MS AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

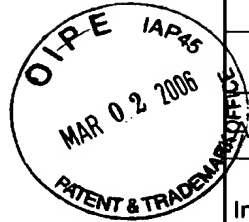
Dear Sir:

INTRODUCTORY COMMENTS

In response to the Office Action dated December 2, 2005, finally rejecting claims 1-9, please amend the above-identified U.S. patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.



AF
Ifw

AMENDMENT TRANSMITTAL LETTER				Docket No. R2184.0123/P123	
Application No. 09/915,360-Conf. #6987		Filing Date July 27, 2001		Examiner Mark R. Milia	
Applicant(s): Hiroshi Ishii et al.					
Invention: IMAGE PROCESSING DEVICE, IMAGE PROCESSING METHOD AND IMAGE FORMING APPARATUS					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	9	- 20 =		x	
Independent Claims	3	- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____.					
A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1073</u>					
as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
<div style="margin-top: 5px;">Mark J. Thronson Attorney Reg. No.: 33,082</div>				Dated: <u>March 2, 2006</u>	
DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP 2101 L Street NW Washington, DC 20037-1526 (202) 775-4742					